

496 – LIFE LONG LEARNER CREDIT COURSE PROGRAM

Background:

WRPS believes that all employees are learners and therefore supports staff access to funding for life long learning. As such, a set amount of funding will be allocated to the Credit Course Budget on a yearly basis. This program can be accessed by employees to enhance their **professional growth plan** and must be applicable to their role within Wild Rose Public Schools. Only courses from an **accredited institution** will be considered.

Eligibility:

Employees must have completed one full year as a WRPS employee of at least 0.5 FTE and possess a continuing position within the organization.

It is expected that courses followed are taken outside of regular working hours.

Procedures:

1. Applications will be received from July 1st to January 30th of a given year, with notice of approval sent out by February 28th of that year.
2. Both the course description from an accredited institution and the cost of the course must accompany the application form. Workshops, seminars, and other non-academic programs are not covered by this benefit.
3. Funding dispersal for the courses: Although candidates are welcome to apply for assistance with more than one course, the maximum reimbursement in any fiscal year (July 1 – June 30) is \$1000.

The reimbursement program applies only to tuition; application fees, travel, and other expenses are not covered. As such, the original receipt for tuition paid must accompany the application form. All receipts will be returned to applicants once the application has been processed.

4. Reimbursement will not be provided until a final transcript showing course completion is submitted to the Division Education Center. A passing grade must be obtained in the course. "Withdrawing" from the course voids the application.
5. Transcripts for course completion cannot be accepted after July 30th of the following year.

Life Long Learner Credit Course Application

Employee Name _____

Place of employment (ie. School name) _____

Job title _____

*Tuition: _____

Institution: _____

Course name: _____

Credits: _____ Start date: _____ Completion date: _____

Course description:

Describe how this course will help you meet your professional growth goals.

Applicant's signature

Date

* The original receipt for tuition costs must accompany this application.

DATE: December 17, 2008